

Mapping the effect of APOE $\epsilon 4$ genotype on intrinsic functional network centrality in patients with amnesic mild cognitive impairment

Zan Wang¹, Zhengjia Dai², Yongmei Shi¹, Hao Shu¹, Duan Liu¹, Yong He², and Zhijun Zhang¹

¹Department of Neurology, Affiliated ZhongDa Hospital of Southeast University, Nanjing, Jiangsu, China, ²State Key Laboratory of Cognitive Neuroscience and Learning, Beijing Normal University, Beijing, China

Target audience Researchers studied on translational medicine in neuroimaging and neuropsychiatric disorders.

Purpose The independent contributions of cognitive and genetic risk factors (i.e., amnesic mild cognitive impairment [aMCI] and apolipoprotein E [APOE] $\epsilon 4$ allele) for Alzheimer's disease (AD) have received considerable attention, but less is known about possible interactive effects. Specifically, in this study we sought to determine whether APOE- $\epsilon 4$ is linked to a specific pattern of intrinsic functional disintegration of the brain in aMCI patients and how the APOE genotype specifically modulates the disease phenotype.

Methods We carried out whole-brain exploration of functional connectome using resting-state functional magnetic resonance imaging (R-fMRI) data from a substantial sample of aMCI patients (27 $\epsilon 4$ carriers and 39 non-carriers) and healthy subjects (45 $\epsilon 4$ carriers and 45 non-carriers), through analyzing voxel-wise network centrality (e.g., functional connectivity strength [FCS] and eigenvector centrality [EC]) that capture different aspects of whole-brain information flow within the connectome. Briefly, FCS is a local measure of the connectome graph indexing the number of direct connections for a given node¹. By contrast, EC is a relative global measure that indexes the qualitative superiority of a node's connections, rather than the number of direct connections per se². Accordingly, voxel-wise analysis of covariance (ANCOVA) models were used to investigate the possible diagnosis \times genotype interactions on local and global information processing within the functional connectome, followed by post-hoc pairwise comparisons.

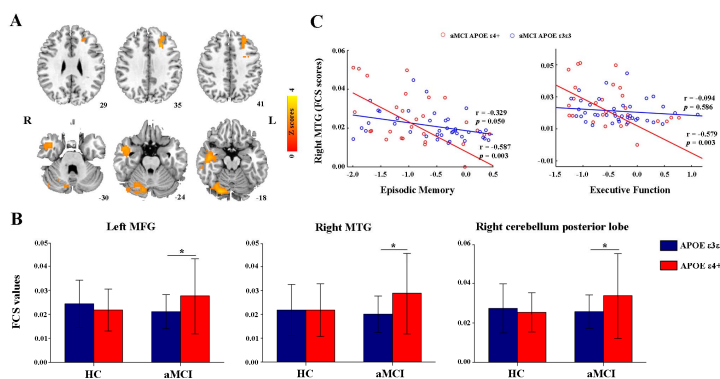


Figure 1 Diagnosis-by-genotype interactions on FCS.

and Figure 2B). Note that in the post-hoc analyses, such genotype differences were absent in the healthy control group. In addition, correlative analyses revealed that regional FCS values in the right MTG negatively correlated with the episodic memory and executive function only in aMCI $\epsilon 4$ carriers (**Figure 1C**).

Discussion and Conclusion In this study, our main finding is that the APOE- $\epsilon 4$ is linked to a specific pattern of intrinsic functional disintegration of the brain in aMCI patients. Specifically, when examining APOE genotype effects in the aMCI group, FCS mainly revealed $\epsilon 4$ -related increases in centrality within the MFG and MTG, but EC revealed $\epsilon 4$ -related decreases in centrality within the OFC and RSC. These findings suggest the early onset functional reorganization of the brain network in aMCI patients carrying APOE $\epsilon 4$ -allele; increased local (or direct) connectivity could be a result of counterbalancing $\epsilon 4$ -related disconnections with hub-like regions within the brain at a global level.

References 1. Wang L, Dai Z, Peng H, et al. Overlapping and segregated resting-state functional connectivity in patients with major depressive disorder with and without childhood neglect. *Hum Brain Mapp* 2014; 35:1154-1166. 2. Di Martino, A., Zuo, X. N., Kelly, C. et al. Shared and distinct intrinsic functional network centrality in autism and attention-deficit/hyperactivity disorder. *Biol Psychiatry* 2013; 74:623-632.

Results We observed significant diagnosis \times genotype interactions on FCS in the right middle temporal gyrus (MTG), left middle frontal gyrus (MFG) and cerebellum posterior lobe (**Figure 1A**). Significant diagnosis-by-genotype interactions on EC were also observed in the right MTG, bilateral orbitofrontal cortex (OFC) and retrosplenial cortex (RSC) (**Figure 2A**). Interestingly, post-hoc analyses revealed that $\epsilon 4$ carriers showed significantly higher FCS and EC in the right MTG than non-carriers in the aMCI group (**Figure 1B** and **Figure 2B**). We further observed opposite effects of the APOE genotype on network centrality in the aMCI group; aMCI $\epsilon 4$ carriers showed increased FCS in the left MFG and cerebellum posterior lobe, but decreased EC in the bilateral OFC and RSC than non-carriers (**Figure 1B**

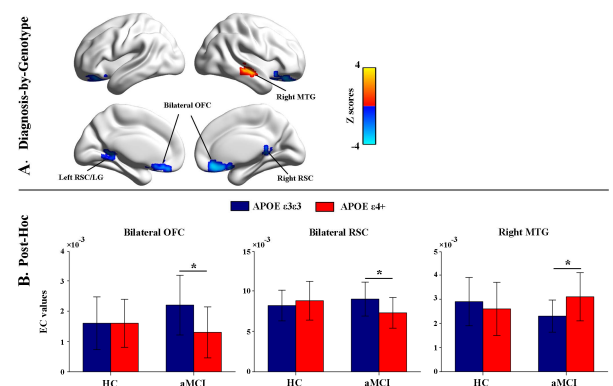


Figure 2 Diagnosis \times genotype interactions on EC.